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CONFIRMATION NO. 4849

SERIAL NUMBER 09/851,738	FILING OR 371(c) DATE 05/09/2001 RULE	CLASS 514	GROUP ART UNIT 1653	ATTORNEY DOCKET NO. P03660US5
APPLICANTS Thomas R. Coolidge, Falls Village, CT; Mario R.W. Ehlers, Lincoln, NE;				
** CONTINUING DATA ***** <i>SWK</i> This application is a DIV of 09/302,596 04/30/1999 PAT 6,284,725 which claims benefit of 60/103,498 10/08/1998				
** FOREIGN APPLICATIONS ***** <i>NONE</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/04/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>SWK</i> Examiner's Signature Initials		STATE OR COUNTRY CT	SHEETS DRAWING 0	TOTAL CLAIMS 10
				INDEPENDENT CLAIMS 2
ADDRESS ARNOLD & PORTER Attn IP Docketing Department Room 1126B 555 Twelfth Street NW Washington ,DC 20004-1206				
TITLE Metabolic intervention with GLP-1 to improve the function of ischemic and reperfused tissue				
FILING FEE RECEIVED 427	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 48

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swl 2/8/05
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Verified and Acknowledged

Examiner's Signature *swl*Initials *swl*

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COUNTRY

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CLAIMS

10

INDEPENDENT

CLAIMS

2

ADDRESS

27141

MCKEE, VOORHEES & SEASE, P.L.C.

ATTN: BIONEBRASKA

801 GRAND AVENUE, SUITE 3200

DES MOINES, IA

50309-2721

TITLE

Metabolic intervention with GLP-1 to improve the function of ischemic and reperfused tissue

FILING FEE

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of time